

VICTIM/WITNESS ASSISTANCE PROGRAMS
Major Expenditure Approval Form

DJ-CVS-28
Rev. 8/92

County/Program Title:

Date/Period of Expenditure:

Contact Name/Phone:

For expenditures of \$250 or more.

Type of Expenditure - Check the appropriate box. If "Other," explain.

Equipment/Permanent Property:

New

Replacement

Training/Reference

Program

Materials

Other:

Description/Justification - This section **must** be completed. Present a detailed explanation and justification of expenditures expected to be incurred. Explain how expenditure will benefit the victim/witness assistance program. Use additional pages or attachments if necessary.

Estimated Budget/Expenditure - Itemize costs in as much detail as possible and appropriate. Use additional pages if needed.

\$

\$

\$

\$

\$

Total Estimated Expenditure

\$

Authorizations

REQUESTOR: It is understood and agreed that any equipment or permanent property for which the county receives state reimbursement under Chapter 950, Wis. Stats., will be used solely for crime victim and witness services. Disposal or other use of such equipment or property requires approval of the Department of Justice.

Signature of Project Coordinator

Date of Request

DEPARTMENT OF JUSTICE: ☐ Approved ☐ Not Approved ☐ Modified:

By: _____

Date: _____